·								Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION RECO								_					
Effective October 1, 2003								19281-4651						
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER SMALL			
TOTAL CLAIMS			0					RATE	FEE	7	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			g min	us 20=	*@			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			a minus 3 = *			1		X43=			X86=			
ΜU	LTIPLE DEPEN	DENT CLAIM PR	RESENT \ \					+145=		OR	+290=			
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL	1	OR	TOTAL	120		
	C	LAIMS AS A	MENDED - PART II								OTHER			
<u> </u>		(Column 1)	(Column 2)			(Column 3)	_	SMALL EN		OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE	_	RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		=		X43=		OR	X86=			
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1115-		7	+290=			
							L	+145=		OR	TOTAL			
			·			10.1 =:	A	DDIT. FE		OR	ADDIT. FEE			
	(Column 1) (Column 2) (Column 3)								ADDI	٦		ADDI-		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE	-	RATE	TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		=		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=			
·								TOTA		OR	TOTAL ADDIT. FEE			
		(Column 1)	•	(Colur	mn 21	(Column 3)	· A	NUUII. FE			, (JUII. I LL	Y		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=			
	Independ nt	*	Minus	***		=		X43=		OR	X86=			
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	- 600			
+145=										OR	+290=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE														
***	it the "Highest Nu The "Highest Nua	mber Previously Pa ther Previously Pai	alo For IN IMI d For" (Total o	o orace r Independ	ent) is the	ııı ə, enter ə. e hiahest numbe	er four	nd in the	appropriate l	ox in co	olumn 1.			